



Back to Basics: Building a New Foundation

# Housing Intake to Home Maintenance Education

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Grant Management Workshop

January 26-29, 2021

# Application

A hand holding a tablet displaying an application form. The form is titled "APPLICATION FORM" and has a section for "PERSONAL INFORMATION". The form includes fields for Last Name, First Name, Middle, Address, City, State, Phone, and Email address.

PERSONAL INFORMATION			
Last Name	First Name	Middle	
Address	City	State	
Phone	Email address		



# Verification of Ownership of Property

LM16 7573 4N

22-26

## This Mortgage Deed

is made the

*Twenty-second* day of *May*

one thousand nine hundred and sixty-four



BETWEEN

\_\_\_\_\_ of 197 Sovereign Road in the City of Coventry and  
\_\_\_\_\_ of the same address his Wife

and \_\_\_\_\_

a member of The Halifax Building Society (hereinafter called "the Mortgagor") of the  
one part

and the said THE HALIFAX BUILDING SOCIETY incorporated under the Building Societies  
Act 1874 as amended and as amended by the Building Societies Act 1962 (hereinafter called "the



Certificate of Title  
City and County of Honolulu

LICENSE NUMBER

EMBLEM NO.

MAKE TYPE DATE ISSUED

VEHICLE IDENTIFICATION NUMBER

WEIGHT YEAR MODEL DATE SOLD NEW

REGISTERED OWNER(S) & ADDRESS TCI

SAFETY CHECK EXPIRES

CT  
ST  
SF  
CF  
ST  
TF  
CP  
SP  
TL S  
MO  
CK

THIS CERTIFICATE IS EVIDENCE OF RECORDED OWNERSHIP OF MOTOR VEHICLE DESCRIBED. KEEP THIS IN A SAFE PLACE. DO NOT KEEP IN VEHICLE. REGISTERED OWNER ABOVE IS ALSO LIENHOLDER WHEN LIENHOLDER'S NAME IS NOT TYPED IN. WHEN VEHICLE IS SOLD, MORTGAGED, ETC., THIS INSTRUMENT, PRIOR TO ENDORSEMENT, MUST BE PRESENTED TO THE DEPARTMENT BEFORE OWNERSHIP TRANSFER CAN BE RECORDED. ANY UNOFFICIAL ERASURES OR ALTERATIONS WILL VOID THIS CERTIFICATE.

SECTION A - ASSIGNMENT OF TITLE BY SELLER  
IF REGISTERED OWNER(S) AND LIENHOLDER ARE SAME, SIGNATURE(S) RELEASING REGISTERED OWNERSHIP ALSO RELEASES LIEN ON VEHICLE. TO RETAIN A LIEN ON THE VEHICLE, REGISTERED OWNER(S) MUST COMPLETE NEW LIENHOLDER PORTION (SECTION E) ON REVERSE SIDE OF THIS CERTIFICATE.

THE ODOMETER READING AT LAST TRANSFER WAS:  
FEDERAL AND STATE LAW REQUIRE THAT YOU STATE THE MILEAGE IN CONNECTION WITH THE TRANSFER OF OWNERSHIP. FAILURE TO COMPLETE ODOMETER STATEMENT OR PROVIDING A FALSE STATEMENT MAY RESULT IN FINES AND/OR IMPRISONMENT. I CERTIFY TO THE BEST OF MY KNOWLEDGE THAT THE ODOMETER READING IS THE ACTUAL MILEAGE OF THE VEHICLE DESCRIBED HEREIN UNLESS ONE OF THE FOLLOWING STATEMENTS IS CHECKED.

ODOMETER READING (NO TENTHS)

CHECK IF APPLICABLE  
[ ] 1. THE MILEAGE READING REFLECTS THE AMOUNT OF MILEAGE IN EXCESS OF ITS MECHANICAL  
[ ] 2. THE ODOMETER READING IS NOT THE ACTUAL MILEAGE. WARNING: ODOMETER DISCREPANCY FOR VALUE RECEIVED, THE UNDERSIGNED HEREBY TRANSFERS THE MOTOR VEHICLE DESCRIBED IN THIS CERTIFICATE TO THE BUYER WHOSE NAME AND ADDRESS IS PRINTED IN SECTION C OR IT TO BE FREE OF ALL LIENS AND ENCUMBRANCES EXCEPT AS STATED IN SECTION E.  
NOTE: SELLER MUST COMPLETE NOTICE OF TRANSFER FORM ABOVE.


DATE OF TRANSFER PRINTED NAME AND SIGNATURE OF SELLER, IF FIRM, PRINTED NAME, TITLE AND SIGNATURE OF AUTHORIZED PERSON

DATE OF TRANSFER PRINTED NAME AND SIGNATURE OF JOINT SELLER, IF HELD IN JOINT OWNERSHIP

BEING DULY SWORN UPON OATH SAYS THAT THE STATEMENTS SET FORTH ARE TRUE AND CORRECT.  
SUBSCRIBED AND SWORN TO BEFORE ME THIS DAY OF 20  
MY COMMISSION EXPIRES (AFFIX SEAL) (NOTARY PUBLIC OR OTHER OFFICER HAVING SEAL)

NOTE: NOTARIZATION OF SELLER'S SIGNATURE(S) IS OPTIONAL, HOWEVER, NOTARIZATION WILL PREVENT REJECTION FOR IRREGULAR SIGNATURE(S) UPON COMPARISON WITH THE SIGNATURE(S) ON FILE OR FOR SIGNATURE VERIFICATION WHEN TRANSFER IS RECORDED IN ANOTHER COUNTY. CS-LMV9111 (2006)

ANY ALTERATIONS OR ERASURES VOID TITLE





# DHCD HQS/ SECTION 8

## Inspection Reports



**Inspection Checklist**  
Housing Choice Voucher Program

U.S. Department of Housing and Urban Development  
Office of Public and Indian Housing

OMB Approval No. 2577-0169  
(Exp. 04-30-2014)

Public reporting burden for this collection of information is estimated to average 0.50 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. This agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless that collection displays a valid OMB control number. Assurances of confidentiality are not provided under this collection.

This collection of information is authorized under Section 8 of the U.S. Housing Act of 1937 (42 U.S.C. 1437f). The information is used to determine if a unit meets the housing quality standards of the Section 8 rental assistance program.

**Privacy Act Statement.** The Department of Housing and Urban Development (HUD) is authorized to collect the information required on this form by Section 8 of the U.S. Housing Act of 1937 (42 U.S.C. 1437f). Collection of the name and address of both family and the owner is mandatory. The information is used to determine if a unit meets the housing quality standards of the Section 8 rental assistance program. HUD may disclose this information to Federal, State and local agencies when relevant to civil, criminal, or regulatory investigations and prosecutions. It will not be otherwise disclosed or released outside of HUD, except as permitted or required by law. Failure to provide any of the information may result in delay or rejection of family participation.

Name of Family	Tenant ID Number	Date of Request (mm/dd/yyyy)
Inspector	Neighborhood/Census Tract	Date of Inspection (mm/dd/yyyy)
Type of Inspection Initial Special Reinspection	Date of Last Inspection (mm/dd/yyyy)	PIA

**A. General Information**

**Inspected Unit**  
Full Address (including Street, City, County, State, Zip)

Year Constructed (yyyy)

Number of Children in Family Under 6

**Owner**  
Name of Owner or Agent Authorized to Lease Unit Inspected  
Phone Number  
Address of Owner or Agent

**Housing**  
Type (check as appropriate)  
Single Family Detached  
Duplex or Two Family  
Row House or Town House  
Low Rise: 3, 4 Stories, Including Garden Apartment  
High Rise: 5 or More Stories  
Manufactured Home  
Congregate  
Cooperative  
Independent Group Residence  
Single Room Occupancy  
Shared Housing  
Other

**B. Summary Decision On Unit** (To be completed after form has been filled out)

Pass	Number of Bedrooms for Purposes of the FMR or Payment Standard	Number of Sleeping Rooms
Fail		
Inconclusive		

**Inspection Checklist**

Item No.	1. Living Room	Yes	No	In-Comp.	Comment	Final Approval Date (mm/dd/yyyy)
1.1	Living Room Present					
1.2	Electricity					
1.3	Electrical Hazards					
1.4	Security					
1.5	Window Condition					
1.6	Ceiling Condition					
1.7	Wall Condition					
1.8	Floor Condition					

Previous editions are obsolete

Page 1 of

Form HUD-52580 (3-2001)  
rel Handbook 7420.8

## Blower Door Test



# Inspections Treatment Reports Work Write-up and Cost Estimates



HOUSE SPECIFICATIONS	
<b>SPECIAL TREATMENTS</b> <ul style="list-style-type: none"><li>• Soil treatment using anti termite chemical</li><li>• Water proofing: toilet and bath flooring</li></ul>	<b>WINDOW</b> <ul style="list-style-type: none"><li>• Clear glass sliding windows on Analok frames</li></ul>
<b>ROOF AND CEILING</b> <ul style="list-style-type: none"><li>• Pre-painted Duranib long span roofing with under sheeting insulation</li><li>• Built up steel truss framing in epoxy paint finish with pre-painted customized gutter</li><li>• Ceiling eaves using fiber cement board</li><li>• Interior ceiling finish made of fiber cement board on metal furring framing</li></ul>	<b>DOOR</b> <ul style="list-style-type: none"><li>• Main door: Solid panel door</li><li>• Other doors: Flush doors</li></ul>
<b>FLOORING</b> <ul style="list-style-type: none"><li>• Interior floor finish using ceramic tiles by Mariwasa</li><li>• For second floor bedrooms: laminated floor planks flooring</li></ul>	<b>LOCKSETS AND HINGES</b> <ul style="list-style-type: none"><li>• Stainless steel in satin chrome finish</li></ul>
<b>PAINTING</b> <ul style="list-style-type: none"><li>• Exterior painting: Textured and semi-gloss paint finish</li><li>• Interior painting: Semi gloss latex</li></ul>	<b>STAIRS</b> <ul style="list-style-type: none"><li>• Solid engineered frame planks in wood stain paint</li></ul>
<b>BATHROOM FIXTURES</b> <ul style="list-style-type: none"><li>• HCG pedestal, bowl and basin set with ceramic tiles flooring accented with decorative wall tiles by Mariwasa</li><li>• All master's bathroom are provided with water heater outlet</li></ul>	<b>ELECTRICAL</b> <ul style="list-style-type: none"><li>• Convenience outlets and switches</li><li>• Circuit breaker</li><li>• Electrical pedestal complete with electrical, telephone and cable provisions with underground connections towards the house</li></ul>
<b>KITCHEN DETAILS</b> <ul style="list-style-type: none"><li>• Countertop: high pressure laminate countertop with stainless steel wash basin with drain board</li><li>• Melamine cabinetry: overhead and under counter</li></ul>	<b>OTHER FEATURES</b> <ul style="list-style-type: none"><li>• Decorative concrete pre-cast moldings with wood stone fitted crazy cut on facade</li></ul>

## Inspection Report

Mr Inspectors Building Inspection Reports are detailed with over 1000 potential defects to assess, quite easy to understand, contain labelled photographs of defects and the report is emailed to you on the same day as the inspection.

Having carried out in excess of 10,000 Building Inspections Melbourne wide since 2004, experience has shown us what our customers want from a building and pest inspection report. We know you want the following and we provide the following:

- Detailed and Easy to Read Building and Pest Inspection reports that are from 60 to 120 pages long.
- High Quality Photographs to help you understand the defect. Labelled with arrows and commentary.
- What Structural defects, Major defects, Safety hazards and Minor defects are present.
- How to get these defects fixed.
- A report emailed to you on the day.
- An inspection report that is extremely detailed, but self-explanatory.
- An inspection report that will explain all the defects at the home including under the house and in the roof space.

Remember, Mr Inspector helped develop an inspection software program currently being sold around the world so you can be confident you are getting one of the most detailed and comprehensive inspection reports in Melbourne, if not Australia. Unfortunately for us, our report format is copied by a few other inspectors.

Types of defects included in your report:

	A	B	C	D	E	F	G
1							
2	Project Estimate Sheet						
3							
4							
5	Contractor						
6	Client Name						
7	Client Address						
8	Client Phone						
9							
10							
11	Phase	Budget Costs			Actual Costs		
12		Labour	Materials	Total	Labour	Materials	Total
13	Land Purchase						
14	Design Costs						
15	Preliminaries						
16	Service Connections						
17	Groundworks						
18	Masonry Work						
19	Floor Structure						
20	Roof Structure						
21	Roof Covering						
22	Doors and Windows						
23	Plumbing						
24	Heating						
25	Electrical						
26	Plaster						
27	Joinery						
28	Decoration						
29	Floor Coverings						
30	Garage						
31	Externals Works						
32	Landscaping						
33							
34	Total	0	0	0	0	0	0
35	Contingency (10%)	0	0	0	0	0	0

# Bid Tabulation and Contract Award

ITEM #	ITEM	RS COST EST					
1	Base (Contract #1)						
2	Exceptions (Contract 2-rehabs only)						
3	Bathroom (rehabs only)						
4	Well or Water Connections						
5	Septic or Sewer Connection						
6	Accessibility Features						
7	Additional Bedroom(s)						
8	Survey						
9	Permit Fees						
10	Property Surveys						
11	Soil Evaluations						
	Exceptions Subtotal	\$0.00					
12	Demolition (Contract #2 Substantials Only)						
	TOTAL	\$0.00					
	% of Cost Estimate						

Rehab Specialist's Recommendation:

Bids Opened By

Bids Recorded By

Program Administrator:

Witness:

# Temporary Relocation Agreement

## TEMPORARY RELOCATION AGREEMENT

This agreement, dated the \_\_\_ day of \_\_\_, 20\_\_\_ by and between, \_\_\_, herein referred to as “HOMEOWNER”, and , herein referred to as the “”.

Whereas, the HOMEOWNER has entered into contract with to obtain rehabilitation services under the Program, and whereas the HOMEOWNER understands and agree to temporarily vacate the premises during the course of the rehabilitation, the following is agreed to:



# Construction Contract

## HOUSING REHABILITATION CONSTRUCTION CONTRACT

THIS Contract entered into this       day of       , 20       , by and between the       herein referred to as “the COUNTY” and       , herein referred to as “the OWNER,” and       herein referred to as “the CONTRACTOR” witnesseth;

WHEREAS, the COUNTY, is a GRANTEE *OR* SUBRECIPIENT of the COMMUNITY DEVELOPMENT BLOCK GRANT PROGRAM funds *OR* INDOOR PLUMBING/REHABILITATION PROGRAM funds from the Virginia Department of Housing & Community Development (“VDHCD”) for the purpose of housing rehabilitation improvements; and

WHEREAS, the OWNER desires to participate in the program and has been determined to be income eligible; and

WHEREAS, the OWNER’S Property (as hereafter defined) is located within the service area of the COUNTY and is owned by the OWNER; and

WHEREAS, the COUNTY has obtained a competitive construction bid from the CONTRACTOR; and

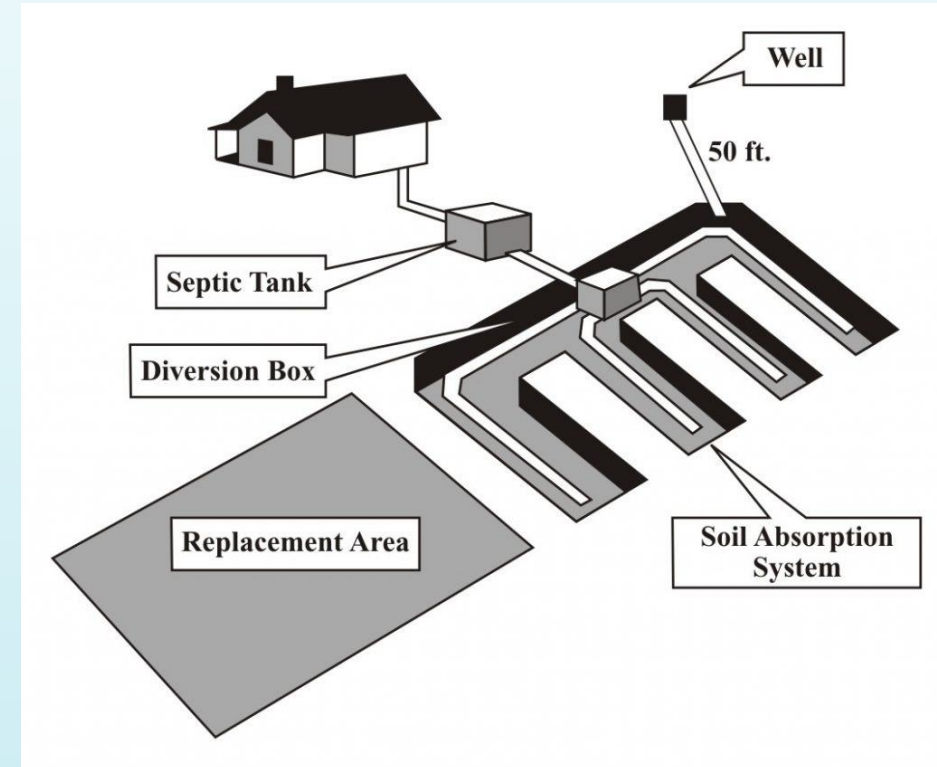
WHEREAS, the Final Work Write-up, constituting the Scope of Work agreed to by the OWNER, the COUNTY, and the CONTRACTOR for the OWNER’S Property, is attached to this document and is considered a part of this Agreement (the “Project”); and

# Legal Documents



- ❖ Investor-Owner Rental Commitment
- ❖ Landlord/Tenant Agreement or Lease
- ❖ Deed of Trust Note or Promissory Note
- ❖ Deed of Trust/Lien
- ❖ Notice of Right to Cancel (loans only)
- ❖ Truth in Lending Disclosure Statement (loans only)
- ❖ Acknowledgement of Receipt of ECOA Notices & Disclosures
- ❖ Recordation Receipt for Deed of Trust

# Permits



# Pay Request



<b>CONTRACTOR INVOICE</b>			
<b>[Your Company Name]</b>			
<b>[Your Company Motto/Slogan]</b>		Date: ____ / ____ / ____ Invoice #:	
<b>[Address 1] [Address 2] [City, State, Zip] [Phone] [Fax]</b>	Our contracting services are guaranteed for [period of time] against material defects and labor. If you are not pleased with the service we provided, please contact us at [Phone] or [email].		
Qty	Contract/Service Description	Price	Amount
		Subtotal	
		Taxes	
		Labor	
		Fees/Others	
		Total	

\_\_\_\_\_  
SERVICE PERSON SIGNATURE

CAMS REMITTANCE COVERSHEET					
DATE:			Comments:		
GRANTEE:					
PROJECT TITLE:					
CONTRACT NO.:					
CAMS REMITTANCE NO.:					
PREPARED BY:					
Payee / Invoice No.	CAMS Activity/ Description (i.e. 'Owner-Occupied Rehab')	Total Invoice Amt.	CDBG Portion	Match Portion	Check No. (if paid)
	TOTALS:	-	-	-	

# Rehabilitation Specialist Duties

- ❖ Inspections, initial, weekly, complaint, pay and final
- ❖ Change Orders
- ❖ Lead Related Reports (Rehab Only)
- ❖ Warranties (Appliances and Materials)
- ❖ Contractor's paper work
- ❖ Occupant Signed Home Maintenance Education Certificate
- ❖ Final Release by Homeowner



# Combined Duties

- ❖ Inspection; initial and final
- ❖ Proof of Mobile Home Destruction
- ❖ Bid Tabs and Contract Awards
- ❖ Warranties (Appliances and Materials)
- ❖ Pay Requests
- ❖ Occupant Signed Home Maintenance Education Certificate

# Home Maintenance Education





Thank you  
for your  
attention and attendance  
Have a great rest of your day